**CHAPTER ONE: ALTERNATIVE CARE**

**1. INTRODUCTION**

**1.1. Concept and Nature of Alternative Child Care**

Alternative care is defined as care for orphans and other vulnerable children who are not under the custody of their biological parents. It includes adoption, foster families, guardianship, kinship care, residential care and other community-based arrangements to care for children in need of special protection, particularly children without primary caregivers. A critical concept in implementing alternative care for children is permanency planning that ensures stability, continuity and a sense of belonging to a family. It involves a process of long-term planning to reconnect children in alternative care with their own families or to place children with adoptive families. This implies the need for a case plan for each child upon admission into care, subject to periodic review. A system of case management is necessary to ensure permanency planning for children in alternative care. Case management is a method of providing services whereby a professional social worker assesses the needs of a child and his or her family and arranges, coordinates, monitors, evaluates and advocates for a package of services to meet the child’s needs. A two-pronged approach to case management is essential. Firstly, there is a need to prevent the admission of a child into institutions at initial contact by providing supportive and supplemental services to families. Secondly, a child should be moved out of residential or foster care and reunited with their family or placed in adoption as appropriate. For children who cannot be reunited with their family or adopted, a programme for independent living should be considered. Child welfare case management refers to managing cases in the best interests of the child. The CRC provides that in every decision affecting a child, various possible solutions must be considered and due weight given to the child’s best interests. Effective case management requires the following approaches:

● Holistic care to ensure full or optimum development of a child (physical, social, emotional, cognitive and spiritual);

● A rights-based and life-cycle approach to ensure that a child’s rights are upheld throughout the different stages of development;

● A family and community-based approach, recognizing that families and communities are the first line of response to dealing with the problems of children, thus interventions should strengthen the ability of families and communities to care for their children; and

● A multidisciplinary perspective that recognizes that children at risk or those without primary caregivers require access to an array of services, due to the multi-faceted nature of their needs. Many agencies and professionals need to work together, with mutual responsibility or joint accountability for managing different aspects of helping a child within the context of their family, community and society.

Ethiopia has ratified the United Nations Convention on the Rights of the Child (UNCRC) and designed favorable policies and national plans to address the plights of children. However, the emphasis directed to mitigate the problems of children living under difficult circumstances still requires much more effort from all concerned actors. In this regard, various governmental and non-governmental organizations are making efforts to support children in general and children under difficult circumstances in particular through different modes of care and services.

Despite the fact that the practice of rendering childcare services for unaccompanied children has a long history in the country, it was not until 2001 that standardized regulatory mechanisms (Alternative Childcare Guidelines) were developed. This was made possible by a joint undertaking of the Ministry of Labor and Social Affairs (MoLSA) and the Italian Development Cooperation (IDC), as part of the interventions to alleviate the problems of children under difficult circumstances in the country.

Accordingly, the national Guidelines consisting of services on institutional care, community-based child support programs, and adoption, foster-care and child-family reunification were developed in 2001.

**1.3. THE STATE OF ALTERNATIVE CHILD CARE SERVICES**

Nowadays, a number of governmental and non-governmental organizations are increasingly opting towards implementing integrated childcare programs with a variety of alternative care components. This can be taken as a good practice in terms of widening the opportunities made available to the diverse needs of target groups leading to a larger margin of inclusion. The range of services on offer must take into account and seek to fulfill the wide range of needs of vulnerable children and the diverse deprivations of rights that such children suffer from. Diversification and integration of services, although increasingly being adopted, is however still in its infancy and needs further development.

Each type of alternative care program - whether it is institutional care, adoption, foster care and the like - likely to have its strengths as well as weaknesses. It ought to be understood that the provision of a particular form of alternative care program can offer some children the chance to develop in new ways. On the contrary, for others, the very services designed to ‘look after’ them can fail to provide well enough for their care and development and, in some cases at the worst, lead to serious abuse of their rights. As such, organizations should critically see the choices and options available and make informed decisions on the choices that are most beneficial to the child. The point of making such a critical assessment is to make available the type of care that best fits the interests and well-being of the child. Although it may not be always easy to balance children’s wishes with their needs and the types of care available, and developing a care strategy custom tailored to suit the needs and circumstances of each individual child is, for all practical purposes, virtually impossible, care givers should, at the very least, attempt to strike this balance.

The participation of children and the community seems to be largely overlooked in the process of decision-making. All children, as stated in the UNCRC, have the right to participate in and state their views on all decisions that can potentially impact on their lives. Service providers and care givers need to realize that children are not merely passive recipients of care and support: their views and wishes should be taken in to account in the design and delivery of services. Their participation is not just a simple matter of rights although that by itself is more than sufficient. Therefore, recognizing children as participants in the process of delivering care and support and facilitating avenues for children's participation is very decisive. Care providers also need to involve communities in their activities as much as that is possible. Meaningful and effective community participation is crucial to the success of alternative care strategies. This is beyond people’s participation, as it involves the community in all aspects of decision-making and ownership.

Another lacuna in alternative childcare programs is the lack of detailed and up-to-date information on the backgrounds of vulnerable children included in care packages, on the intervention strategies employed and on their outcomes. Information should be collected and documented on the details of the background ofchildren receiving care, the type of intervention or care strategies employed, the resources used in such strategies and their outcomes. Such information, if properly gathered, validated and documented, can provide a useful feedback to inform further planning and intervention. Proper documentation systems - it should be understood - do more than just record information. There is no point in demanding time consuming records if they are not used for review and planning; developing sound intervention strategies requires reliable information on the detailed background of target children and/or families.

Further, many of the care givers currently working on alternative care do not have well developed internal operational guidelines that can serve as references for staff on how to deal with children in the process of service provision. Some organizations implementing institutional care use disciplinary rules and regulations developed with the principal aim of disciplining the children as working guidelines. But such rules often focus on the obligations of children and do not take into account their views and rights.

These updated Alternative Childcare Guidelines derive from the recognition of these existing realities surrounding childcare in the country and it is expected that they will contribute to improve the situation of children being assisted under various alternative childcare programs.

**2. OBJECTIVES OF THE GUIDELINES**

**2.1. General Objective**

The overall objective of the Alternative Childcare Guidelines is to establish a regulatory instrument on childcare systems with a view to contribute towards improving the quality of care and service provided by governmental and non-governmental organizations involved in childcare and advance the welfare of the orphans and other vulnerable children (OVC) in the country.

* 1. **Specific Objectives**
  2. To facilitate the provision of quality and effective care and support to OVC, based on the principles that they ensure the best interests of the child;
  3. To set minimum conditions on the delivery of alternative childcare services in the country, so that organizations can adopt and apply them in the context of the objective reality of their regions;
  4. To develop sound child-oriented operational frameworks in accordance with the rights-based approach both at institutional and community levels, so that all children will be ensured of the necessary protection;
  5. To promote a participatory approach of dealing with the care and support of orphans and vulnerable children.

**4. DEFINITION OF TERMS**

* 1. **Abandoned Child**

For the purpose of these Guidelines, an abandoned child is the child who is left unattended or deliberately rejected by his/he parents.

**4.2 Adoption**

For the purpose of these Guidelines, adoption is a childcare and protection measure that enables an unaccompanied child to benefit from a substitute and permanent family care.

* 1. **Adoption Service Provider Organization (ASPO)**

For the purpose of these Guidelines, an Adoption Service ProviderOrganization (ASPO) is a legally registered and licensed agent to carry out inter-country adoption service.

* 1. **Adoptive parent**

For the purpose of these Guidelines, an adoptive parent is an Ethiopian and/or an expatriate who have adopted an Ethiopian child.

* 1. **Best interests of the child**

For the purpose of these Guidelines, best interests of the child signify the situation of taking into account the most beneficial advantages of the child in every action or decisions concerning him/her. The child’s best interests couldbe determined by consulting the child, care givers, laws and appropriate governmental bodies.

* 1. **Biological Parent/s**

For the purpose of these Guidelines, biological parent/s means both birth parents if they are alive, or the mother or father if one is deceased.

* 1. **Childcare Institution**:

For the purpose of these Guidelines, a childcare institution is an establishment founded by a governmental, a non-governmental organization or individuals according to the procedures in section three of these Guidelines. It shall give an all rounded care and support for a/more group/s of disadvantaged children in a center.

* 1. **Child**

For the purpose of these Guidelines, a child means every human being below the age of 18 years.

* 1. **Children in Institutional care**

For the purpose of these Guidelines, children in institutional care are those children who are admitted to particular childcare institutions to receive care and support based on the eligibility criteria set forth in these Guidelines.

**4.9 Community**

For the purpose of these Guidelines, a community means a group of individuals living in one locality, who share a set of common values, interests, intent, belief, resources, needs, risks, etc. and have a common obligation to the welfare of their children.

**4.10 Community-Based Child Care Program**

For the purpose of these Guidelines, a community-based childcare program is a childcare service planned and implemented within the community setting, in order to cater for the needs/rights of orphans and vulnerable children with the full involvement and ownership of the community.

**4.11 Community-Based Organization (CBO)**

For the purpose of these Guidelines, community-based organization is a local structure and system set up through the interest of the community members or a group of individuals in a given community. For example: *Idir*, M*ahber*, *Iqub*,Youth Associations, Self-help Groups, etc.

**4.12 Community-Based Child Care Organization (CBCCO)**

For the purpose of these Guidelines, a Community-Based Childcare Organization is a governmental and/or non-governmental organization, community circle, religious group, an individual and any other setting that empowers a community with financial, material, technical or other resources to set-up or run a community-based childcare program.

**4.13 Relevant Authority**

For the purpose of these Guidelines, a relevant authority is a Federal or Regional Government body (organization) legally mandated to facilitate, certify, monitor and evaluate childcare programs, which includes MoWA, BoWA, BoLSA and others.

**4.14 Domestic adoption**

For the purpose of these Guidelines, domestic adoption is an adoption that involves adoptive parents and a child of the same nationality and the same country of residence.

**4.15 Fostering Agreement**

For the purpose of these Guidelines, a fostering agreement is a document that should be signed prior to the placement of the child with the foster family specifying the rights and responsibilities of the foster family, of the biological parent/s (if alive) and of the foster family care organization.

**4.16 Foster Applicant**

For the purpose of these Guidelines, a foster applicant is a person or a family who applies to a foster family care organization to be a foster parent.

**4.17 Foster Family**

For the purpose of these Guidelines, a foster family is a family which has applied to and is selected by a foster family care organization to provide a temporary physical care and emotional support and protection for an unaccompanied child placed through a foster family care program for an unspecified time.

**4.18 Foster Family Care**

For the purpose of these Guidelines, a foster family care is a planned, goal-directed alternative family care where an unaccompanied child is temporarily placed and gets adequate physical, emotional and psycho-social care and protection until he/she is either reunified with his/her biological parent/s or placed within another type of permanent care or institution.

**4.19 Foster Family Care Organization**

For the purpose of these Guidelines, a foster family care organization is an organization which is registered and licensed by the accredited governmental body to implement foster family care placement.

**4.20 Institutional Child Care Services**

For the purpose of these Guidelines, institutional childcare services are holistic types of care and supports designed to fulfill the physiological and psychosocial needs of children in the childcare institutions which are offered by professionally qualified workers until the children are transferred to a more permanent alternative care program.

**4.21 Inter-country Adoption**

For the purpose of these Guidelines, inter-country adoption is an adoption that involves a change in the child’s habitual country of residence, whatever the nationality of the adopting parents. It also includes an adoption that involves parents of a nationality other than that of the child, whether or not they reside and continue to reside in the child’s habitual country of residence.

**4.22 Single Orphan**

For the purpose of these Guidelines, single orphan refers to a child who lost one of his/her biological parent/s regardless of the cause of the loss.

**4.23 Double Orphan**

For the purpose of these Guidelines, double orphan refers to a child who lost both of his/her biological parent/s regardless of the cause of the loss.

**4.24 Orphans and Vulnerable Children (OVC)**

For the purpose of these Guidelines, Orphans and Vulnerable Children (OVC) are children whose survival and development is jeopardized by certain circumstances and are therefore in need of alternative childcare services. The type of target children under this category includes - but is not limited - to the following groups:

1. Single and double orphans;
2. Street children;
3. Abandoned children whose parents /families are untraceable;
4. Children with disability;
5. Trafficked children;
6. Children exposed to the worst forms of child labor;
7. Children infected or affected by HIV/AIDS;
8. Victims of sexual abuse and exploitation;
9. Displaced children;
10. Non-orphan children whose parents are not able to support the child due to illness, injury or detention;
11. Child mothers;
12. Children in conflict with law;
13. Separated children;
14. Refugee children;
15. Other target children, depending on the local definition of vulnerability.

**4.25 Psychosocial Service**

For the purpose of these Guidelines, psychosocial support is the type of support that goes beyond catering for the physical and material needs of the child. Psychosocial support emphasizes one’s emotional and spiritual well-being and has a bearing on one’s psychological health*.* In other words, it is an ongoing process of meeting emotional, social, mental and spiritual needs, all of which are considered essential elements for the meaningful and positive development of the child.

**4.26 Reintegration**

For the purpose of these Guidelines, reintegration refers to a rehabilitative intervention meant for children whose parents/extended families are untraceable or for those who reach the maximum age limits in the institution to facilitate their permanent placement in a community environment either individually or in groups.

**4.27 Reunification**

For the purpose of these Guidelines, reunification refers to a rehabilitative intervention designed to facilitate the reunion of orphans or other vulnerable children separated from their families with biological parents or member/s of the extended family to restore a family environment as a means of a permanent placement for the proper upbringing and development of the child.

**4.28 Youngster**

For the purpose of these Guidelines, “youngster” refers to a teenager over the age of 15 who is eligible for the reintegration program.

**4.29 Monitoring**

For the purpose of these Guidelines, monitoring is a continuous or periodic review of program/project implementation, focusing on inputs, activities, work schedules and outputs. It enables timely identification and correction of deviations of the project.

**4.30 Evaluation**

For the purpose of these Guidelines, evaluation refers to a systematic periodic review of the performance, effectiveness and impacts of the project/program.

Evaluation can be done during implementation, some years or several years after the completion of the project and it focuses on making judgments on the value, outputs and impacts of the program/project.

**4.31. Indicators**

For the purpose of these Guidelines, indicators are markers of observable changes or variables which enable to measure change against objectives set in the project. Effective Indicators of change could focus on the following five major dimensions:

1. Changes in the life of the children;
2. Changes in the community response and practices towards care and support for OVC;
3. Changes in the participation of children;
4. Changes in nondiscrimination of children;
5. Changes in policies and laws.

**CHAPTER TWO: ALTERNATIVE CHILDCARE GUIDELINES**

**2.1 TYPES OF ALTERNATIVE CHILDCARE**

* + 1. **A. GUIDELINE ON COMMUNITY-BASED CHILDCARE**

1. **GENERAL**

Community-based childcare is an alternative that provides care and support to the children in a state of condition that is familiar to the children who used to experience it. The objective of the Community-based Childcare Service is to mobilize the community, its resources and indigenous knowledge with the ultimate goal of addressing the needs and rights of orphans and other vulnerable children (OVC) in a sustainable manner. Practically, community-based childcare is believed to be a better alternative because of the fact that it is by far cost effective and its greater advantage of reaching large number of target children in a given community. This approach encompasses a wide range of preventive, curative and rehabilitative strategies which respond to the needs and best interests of the target children. The underlining rationale behind this approach is that the grassroots community structures and organizations can provide for and fulfill the emotional, social, physiological and spiritual needs of OVC and effectively protect them from abuse and exploitation, without such children being removed from their families or community environment. Thus, organizations engaged in the provision of community-based childcare programs should focus more on building the capacity of the community to care for its orphans and vulnerable children and working with existing structures, institutions and organizations and empowering them to assume responsibilities for providing care and support for OVC. This endeavor requires guidelines on how it should be done.

1. **OBJECTIVES**
2. **General Objective**

* The overall objective of the community-based childcare program is to mobilize the community and its resources with the ultimate goal of ensuring a sustainable and healthy growth and development of orphans and vulnerable children within a given community.

1. **Specific Objectives**

* To enhance the participation and capacity of the community-based organizations so as to enable them to deliver a sustainable care and support for orphans and vulnerable children.
* To fulfill the basic rights/needs of orphans and vulnerable children including their rights of access to:

1. Shelter;
2. Food;
3. Supplementary nutritional assistance;
4. Academic and/or vocational education;
5. Care and affection;
6. Health care and counseling;
7. Play and recreation;
   1. Special care and attention for children with disabilities.
8. **ROLES AND RESPONSIBILITIES OF CBCCO** 
   1. **A CBCCO shall have the following major roles and responsibilities**:

* Initiate, plan, implement, follow-up, monitor and evaluate the childcare program;
* Design and mainstream child protection policy of the organization at the program and institutional levels to make sure that the rights of the child are dully protected;
* Raise funds, mobilize resources and solicit support from members of the community and external sources;
* Facilitate the meaningful participation of the community and its target children/families in its program;
* Build the technical and financial capacity of CBCCOs, with a view to enable them to deliver proper care and support for OVC in the community environment;
* Advocate for the rights of OVC and create a conducive environment where children could receive sustainable assistance from their community;
* Assist a community and its members to identify, develop and utilize skills and resources they need to effect changes in their own communities in order to enhance their capacity to care for children;
* Empowering members of a community to recognize their responsibility and obligation to the welfare/well-being of children in their community;
* Design, with the full involvement and participation of community members, an appropriate alternative childcare program that addresses the needs of children which has the best interests of the child at its core;
* Plan, and implement programs through which the rights of the child are understood and observed by every member of a community;
* Create Network and collaboration with likeminded CBCCOs and other stakeholders to strengthen linkages and referral systems;
* Submit quarterly, biannual and annual reports to the relevant authorities.

**2.1.2GUIDELINE ON REUNIFICATION AND REINTEGRATION PROGRAMS**

1. **GENERAL**

Reunifying children separated from their parents/relatives due to natural or man-made catastrophe to their birth families or relatives is a widely recognized practice as a primary alternative against residential care and other out-of-home child welfare services. Undeniably, children can best develop a feeling of security, physical/mental health and personal identity within their families. Hence, organizations engaged in institutional care have a responsibility to implement reunification/reintegration as an ongoing and integral part of their services. Therefore, returning children as early and safely as possible to their families or communities is strongly recommendable as a means to achieve better outcomes for children, retention of important family connections and avoid their drift into long-term and often problematic pathways in out-of-home care. Such reunification and reintegration should not be done haphazardly, and there is a need to set standard procedures and modalities which can inform and guide the reintegration process.

1. **OBJECTIVES**
2. **Objectives of the Child-Family Reunification Program**

* Restore child-family ties by reuniting the child with biological parents or extended family members;
* Facilitate conditions for the assimilation of children with their parents and members of the extended family and promote their all rounded development;
* Create opportunities for children in which they can learn familiar and social values and norms living with their parents and/or members of the extended family;
* Support parents and/or members of extended families to re-assume their responsibility to cater for their children.

1. **Objectives of the Reintegration Program**

* Facilitate conditions for children's adjustment in the community;
* Equip the children with necessary skills and financial resources to enable them to become independent and self-reliant citizens;
* Create opportunities in which children can interact in the community life, learn socio-cultural values and norms of the community for their proper development and reintegration.

1. **ROLES AND RESPONSIBILITIES OF THE ORGANIZATION** 
   1. A childcare organization implementing reunification/reintegration program shall have the following main roles and responsibilities:

* Properly plan the reunification and reintegration as an integral part of its ongoing programs;
* Allocate/assign proper financial, material and human resources to carry out the reunification and reintegration program;
* Give adequate attention to the participation of children on matters that affect them in the process of planning and implementing the programs and keep the staff informed about the objectives and desired outcomes of the strategy;
* Make every possible effort to carry out the program in accordance with the best interests of the child;
* Provide the parents an induction on parenting skill and the rights of the child;
* Conduct family tracing and identify biological parent/s and/or member/s of extended family; convince them about their obligations and proceed to reunify the child if the outcome of the tracing is not against the best interests of the child;
* Conduct periodic follow-up and evaluation on a reunified/reintegrated child during the first year, and once in a year thereafter till the child is well adjusted;
* Submit quarterly, biannual and annual activity reports of the organization to the competent government authority.

**2.1.3. GUIDELINES FOR FOSTER CARE**

**1. GENERAL**

Foster Care is one component in a continuum of alternative childcare services. It refers to short or long term care within the private house of foster families, mainly addressing those children who are unable to live with their biological parents and families. Providing foster care is often a difficult and demanding job, for both the organization and foster families and, as such, some financial contribution can be and is often paid to the foster family to compensate the additional costs incurred by the foster child. Although foster care is often difficult, it has several advantages over other alternative childcare services, especially over institutional care. First and arguably most important of these benefits, is that Foster Care can provide the child with a high level of attention, nurturing and continuity only possible within a family. Placement in the foster parent’s family gives the child a better chance of getting acquainted with life in a family environment and facilitates his/her smooth integration into the community at a later stage. Furthermore, as practice in some organizations has shown, placing children in a foster family has served as a stepping-stone to child-family reunification. In light of this, implementing foster care arrangement needs guidelines that should be adhered by foster care implementing organizations.

**2. OBJECTIVE**

1. **General Objective**

* The overall objective of foster care service is to secure a substitute and temporary familial environment for orphans and vulnerable children on a temporary basis, till a child is reunified with his/her extended family or placed in other permanent alternative childcare program.

1. **Specific Objectives**

* The specific objectives of a foster care service involve securing: Shelter; Food; Education; Health care; Play and recreation; Psychologically stimulating familial environment.

**3. ROLES AND RESPONSIBILITIES**

1. A foster family care organization with respect to the child has the right to:

* Apply to the relevant authority for the review of and to get information on the status of a child when there are adequate grounds indicating that the child is abused, neglected and/or exploited and, for his/her best interest, cannot be allowed to remain in his/her present family environment;
* Select the appropriate foster family for a child when the biological parents, the extended family and/or guardians are absent or deemed unable or unfit to give their views on the characteristics of the foster family;
* Seek and get information on the growth and development of the child from the foster family through periodic home visits and reports;
* Terminate the foster placement and change the foster family when the care given to the child is deemed to be not adequate to the child’s healthy development and growth;
* Terminate the foster family care and transfer the child to other permanent alternative childcare program when such a transfer is in the best interests of the child.

1. A foster family care organization, with respect to the child, has the obligation to:

* Work in close collaboration with the police and whenever available with child protection units and child-focused organizations, in order to reach out for a child who is abused, neglected and/or exploited and for her/his best interests to place him/her in foster care;
* Consult and involve the child in a manner appropriate to his/her age and degree of maturity in the process of foster care placement;
* Respect the right of the child to get information on his/her biological parents and/or members of the extended family unless it is deemed to be against the best interests of the child;
* Whenever possible, place siblings with the same foster family, except in cases where it is against the best interests of the child; when the latter is the case, make arrangements to support regular contact between siblings;
* Search for permanent alternative family care in cases where reunifying the child with his/her biological parents is not possible or against the best interests of the child.

1. A foster family care organization, with respect to the biological parent/s and/or member of the extended family, has the obligation to:

* Consider the opinions of the biological parent/s and/or members of extended family on the processes of the selection of a foster parent in relation with religion, language, ethnic and cultural background, etc.;
* Respect the rights of the biological parents and/or members of extended family to get information on the child placed in foster family care unless it is believed to be against the best interests of the child;
* Promote partnership between the biological parent/s and the foster family, when deemed convenient and useful to ensure the best interests of the child;
* Inform the biological parent/s and/or members of extended family of any significant event in the child’s life unless it is deemed to be against the best interests of the child;
* Accept grievances, opinions, and comments of the biological parents, members of the extended family and/or guardians on the status of the child placed in a foster family care in writing and take corrective measures when deemed appropriate;
* Reunify a foster child to his/her biological parent/s when the relevant authority that had terminated the parental rights reviews the case and re-establishes the parental rights with the conclusion that the family condition has returned to normal.

1. A foster family care organization, with respect to a foster family, has the right to:

* Interact with the foster family for devising and monitoring a plan for each child;
* Follow-up and monitor the care offered to each child through the foster care placement service it provides.

1. A foster family care organization with respect to a foster family, has the obligation to:

* Cover the expenses necessary to care for the child placed in foster care (if the foster family does not volunteer to cover the expenses);
* Pay the foster parent/s a service fee (if the foster parent/s does/do not volunteer to give service for free).

1. A foster family, with respect to a foster family care organization, has the right to receive information that pertains to the psychological, emotional or health history of the child and his/her family.
2. A foster family, with respect to a foster family care organization, has the obligation to:

* Participate in the devising and revising of a plan for each child in care;
* Report to the organization all information related to the child’s progress/ problems (if any); and/or
* Report to the organization in the case of injury, disappearance or any other major event in relation to the child.

1. A foster family, with respect to the child, has the obligation to:

* Provide the child with adequate material care and emotional support;
* Protect the child from any type of abuse and neglect.

1. A foster family care organization, with respect to the relevant authority, has the right to get feedback on periodic evaluation of its activities.

**3.10.** A foster family care organization, with respect to the relevant authority, has the obligation to:

* Submit quarterly, biannual and annual report to the relevant authority;
* Treat all placement records as classified documents.

**3.11.** A relevant authority, with respect to the foster family care organization, has the right to follow up and monitor the services the organization provides to children and families.

**3.12.** A relevant authority, with respect to the foster family care organization, has the obligation to evaluate the activities of the organization and give feedback to the organization.

**2.1.4. GUIDELINES ON ADOPTION**

**1. GENERAL**

The importance and expansion of adoption services as one alternative form of care is necessary as a lot of children are left to fend for themselves owing to the dire poverty and the spread of HIV pandemic in the country. This condition also contributed to mushrooming of childcare institutions and adoption agencies in great numbers in the country, to address the plight of orphans and abandoned children through inter-country adoption service. While inter-country adoption is taken as an alternative form of childcare, local adoption seems largely neglected or utterly out of the focus of attention of many adoption service provider organizations. In any case, the provision of adoption service in general and that of inter-country adoption in particular requires strict adherence to the law of the land and guidelines and even stricter enforcement of the law on the part of the authorities in charge.

**2. OBJECTIVES OF ADOPTION**

1. **General objective**

* The main purpose of adoption service is to cater for the proper care and development of orphans and destitute children by placing them in a substitute and suitable familial environment.

1. **Specific Objectives**

* Securing basic services to adopted child, including:
  + 1. Shelter;
    2. Food;
    3. Education;
    4. Health care;
    5. Psychologically stimulating familial environment.
* Establish a substitute parental care and emotional bond between the child and adoptive parents.

**3. ROLES AND RESPONSIBILITIES OF ADOPTION SERVICE PROVIDER ORGANIZATIONS**

* Assist in building the capacity of childcare institutions/orphanages in an effort to organize and compile relevant and up-to-date data about the background and progress of children.
* Sensitize the public to encourage domestic adoption.
* Make sure that the employees they hire have the required qualifications and experiences in the areas of childcare.
* Support every effort being done to encourage domestic adoption.
* Organize and document pertinent data on children adopted by foreign countries and submit timely reports to the relevant Government according Institution to the timetable set for such reports.
* Facilitate conditions and provide the necessary support for young people who were adopted from Ethiopia to foreign countries as children and who plan to come to Ethiopia, either individually or in group.
* Make sure that adoptive parents, unless forced by circumstances beyond their control, come to Ethiopia and take their adopted child/children in person.
* Provide support to destitute children living with their families.
* Avoid selecting a child for adoption on the basis of ethnicity and religion.
* Submit quarterly, biannual and annual reports to the relevant authority.

**4. ROLES AND RESPONSIBILITIES OF CHILDCARE INSTITUTIONS IN ADOPTION**

* Record and document detail and up-to-date information about the background and progress of the children.
* In collaboration with relevant bodies, make every effort possible to encourage domestic adoption.
* Sensitize the public to encourage domestic adoption.
* Give a child under their care to any legally registered and licensed Adoption Service Provider Organization (ASPO) through legal procedures.
* Before giving the child for adoption, provide sufficient information to the relevant authority, having the authority to follow up the well being of children, the identity of the child, how the orphanage received the child and about the personal, social and economic position of the adopter.
* In cases where the child is not having parents, sign adoption agreement with the adopter.
* Make sure that children admitted to a childcare institution are not given for adoption before; at least, two months of stay under institutional care and until all other alternatives are exhausted.
* Consider adoption only when receiving permission to facilitate the adoption of a child from a relevant authority.
* In collaboration with the ASPO, give pre-adoption orientation and counseling for older children.
* Ensure that siblings are not separated and are adopted by the same family or to the same area.

**2.1.5 GUIDELINE FOR INSTITUTIONAL CHILDCARE SERVICE**

1. **GENERAL**

It is widely accepted **that childcare within an institutional setting should be used as a short-term alternative care strategy** and only as a last resort when all other types of childcare options have been exhausted. Countries which have traditionally relied on institutional care are now making major transformations to their childcare and social welfare policies, moving towards community care options. Such transformations are rooted in the research-based evidence of the impact of institutions on children’s development the vulnerability to abuse within the institutional settings and the high operational costs such institutional care often requires (Better Care Network 2006).

Both international and local experiences have shown that long periods in an institution make it harder for a child to assimilate back into the community and deny them access to the life-long attachments and community support systems that family relationships and communities can provide. Hence, early intervention is of paramount importance for placing children in other alternative childcare programs, so that they would experience proper personality development. When all options are exhausted, upbringing children in institutions requires acceptable standards that should be adhered for the best interests of the child.

1. **OBJECTIVES**
2. **General Objectives**

* The overall objective of institutional childcare is to contribute towards the improvement of the physical, social, psychological well-being and ensuring self-reliance among children in the childcare institutions, by creating access to the fulfillment of their rights for basic and psychosocial services and seeking every other possible alternative placement for permanent upbringing of children.

1. **Specific Objectives**

* To cater for the basic and psychosocial needs (food, shelter clothing, education, sanitation and health, play and recreation, counseling, emotional needs as well as social interaction) of children in the childcare institutions for their wholesome growth and development;
* To enable children to develop their skills and potentials to become self reliant individuals valued by the community;
* To strive to solicit other options for placing the children in other alternative childcare programs with the view to enhance proper development of children.

1. **ROLES AND RESPONSIBILITIES**

3.1. Keeping the common obligations of organizations indicated in section three of these Guidelines in mind, **childcare institutions** shall discharge the following responsibilities:

* Provide care and support for children admitted into the institution based on the eligibility criteria and objectives of the institutions;
* Make sure that the number of children accepted is properly balanced to the financial, material and human resource capacity of the institution;
* Explore every possible effort to provide other alternative care (reunification, reintegration, foster care, community-based care and adoption) as early as possible based on the best interests of the child.
* Provide care to children with disabilities without any discrimination and immediately report the presence of these children within the institution to the relevant regional government authority, to facilitate collaboration with other organizations for the provision of appropriate services to them;
* Prepare internal child protection policy of the organization to make sure that every child in the institution is protected from all forms of violence, abuse and exploitation;
* Arrange ways and means to enhance the involvement and interaction of children under their care with the community members in the area. Childcare institutions should give adequate emphasis to the participation of children in all matters that concern them with due consideration to their age, mental and physical levels of maturity;
* Work in collaboration with relevant bodies to ensure that the properties of orphaned children admitted to institution are protected and their inheritance rights are legally protected;
* In order to protect the well-being of children, childcare institutions should never give children to either adoptive parents or ASPO prior to the order of the relevant court. Moreover, during the adoption process, institutions should make sure that siblings are not separated and are adopted by the same family and/or to the same area;
* If any child under the care of childcare institutions passes away, the concerned institution must report the incidence within maximum of two days, together with the cause of death, date and place of death and funereal to the relevant authority.
* A childcare institution must immediately report to the relevant authority any case of epidemic outbreak so that immediate interventions could be taken;
* A childcare institution must keep records (data) about the profile of every child under their care and make sure that the files are kept under the strict confidentiality;
* Establish and strengthen networking among other institutions to promote experience sharing and collaboration;
* A childcare institution has the obligation to submit bi-annual and annual report to the accredited and competent Regional Government authority;
* A childcare institution shall participate in the preadmission assessment of the child to learn about the background of the child, together with the experts from Regional Government authority.

**CHAPTER THREE: ALTERNATIVE CARE IN EMERGENCY SITUATIOS**

1. **Application of the Guidelines**

1. The present Guidelines should continue to apply in situations of emergency arising from natural and man -made disasters, including international and non-international armed conflicts, as well as foreign occupation. Individuals and organizations wishing to work on behalf of children without parental care in emergency situations are strongly encouraged to operate in accordance with the guidelines.

2. In such circumstances, the State or de facto authorities in the region concerned, the international community and all local, national, foreign and international agencies providing or intending to provide child -focused services should pay special attention:

* To ensure that all entities and persons involved in responding to unaccompanied or separated children are sufficiently experienced, trained, resourceful and equipped to do so in an appropriate manner;
* To develop, as necessary, temporary and long-term family- based care;
* To use residential care only as a temporary measure until family- based care can be developed;
* To prohibit the establishment of new residential facilities structured to provide simultaneous care to large groups of children on a permanent or long-term basis;
* To make cooperation with family tracing and reintegration efforts mandatory.

3. Organizations and authorities should make every effort to prevent the separation of children from their parents or primary caregivers, unless the best interests of the child so require, and ensure that their actions do not inadvertently encourage family separation by providing services and benefits to children alone rather than to families.

4. Separation initiated by the child’s parents or other primary caregivers should be prevented by:

* Ensuring that all households have access to basic food and medical supplies and other services, including education;
* Limiting the development of residential care options and restricting their use to those situations where it is absolutely necessary.

1. **Care arrangements**

5. Communities should be assisted in playing an active role in monitoring and responding to care and protection issues facing children in their local context.

6. Care within a child’s own community, including fostering, should be encouraged, as it provides continuity in socialization and development.

7. As unaccompanied or separated children may be at heightened risk of abuse and exploitation, monitoring and specific support to cares should be foreseen to ensure their protection.

8. Children in emergency situations should not be moved to a country other than that of their habitual residence for alternative care except temporarily for compelling health, medical or safety reasons. In that case, this should be as close as possible to their home, they should be accompanied by a parent or caregiver known to them, and a clear return plan should be established.

9. Should family reintegration prove impossible within an appropriate period or be deemed contrary to the best interests of the child, stable and definitive solutions, such as adoption or kafala of Islamic law, should be envisaged; failing this, other long-term options should be considered, such as foster care or appropriate residential care, including group homes and other supervised living arrangements.

1. **Tracing and family reintegration**

10. Identifying, registering and documenting unaccompanied or separated children are priorities in any emergency and should be carried out as quickly as possible.

11. Registration activities should be conducted by or under the direct supervision of State authorities and explicitly mandated entities with responsibility for and experience in this task.

12. The confidential nature of the information collected should be respected and systems put in place for safe forwarding and storage of information. Information should only be shared among duly mandated agencies for the purpose of tracing, family reintegration and care.

13. All those engaged in tracing family members or primary legal or customary caregivers should operate within a coordinated system, using standardized forms and mutually compatible procedures, wherever possible. They should ensure that the child and others concerned would not be endangered by their actions.

14. The validity of relationships and the confirmation of the willingness of the child and family members to be reunited must be verified for every child. No action should be taken that may hinder eventual family reintegration, such as adoption, change of name or movement to places far from the family’s likely location, until all tracing efforts have been exhausted.

15. Appropriate records of any placement of a child should be made and kept in a safe and secure manner so that reunification can be facilitated in the future.